

# Disease Reporting Requirements for Health Care Providers in Hawaii (January, 2001)

The diseases described below are declared by the Director of Health to be dangerous to public health and shall be reported to the Department of Health as specified. Restrictions shall be imposed on cases and contacts as indicated in ***Hawaii Isolation and Control Requirements, January, 2001***.

Any communicable disease not listed below occurring beyond usual frequency, or of unusual or uncertain etiology, including diseases which might be caused by a genetically engineered organism, shall be reported to the Department of Health (Epidemiology Branch) by telephone. Likewise, all suspected outbreaks of a notifiable disease shall be reported to the Epidemiology Branch by telephone.

If the final diagnosis or provisional diagnosis in the absence of definitive tests for confirmation is a reportable disease and **if the case is not known to have already been reported** to the Department, the physician responsible for the management of that case or the hospital in which the case is being treated shall report that case in accordance with the methods described below. If neither hospital or physician reports, **both** shall be considered in default of their responsibility to report.

This requirement applies to all settings in which patient care is provided, including passenger ships discharging passengers in Hawaii and all facilities performing medical evaluations, including blood banks.

***Failure to comply with these requirements is a misdemeanor under Hawaii Law.***

## Reporting Categories

**Urgent reports:** Diseases labeled “urgent” shall be reported by telephone as soon as a provisional diagnosis is established. The telephone report shall be followed by a written report submitted by mail or fax within three days to the Epidemiology Branch on Oahu, or to the District Health Office on the neighbor islands.

**Routine reports:** Diseases labeled “routine” shall be reported by mail, by telephone, or fax to the Epidemiology Branch on Oahu, or to the District Health Offices on the neighbor islands.

**Routine/Enteric (enteric prevention priority):** Diseases labeled “routine - enteric prevention priority” shall be reported by telephone as soon as a working diagnosis is established if the individual case is a ***food handler, direct care provider, or pre-school aged child***. Otherwise routine reports may be submitted.

**\*Confidential (High Confidentiality):** All reports are confidential, however, diseases which may carry a social stigma are to be reported with **extra precautions** to assure patient confidentiality. Reports are to be submitted within three days of diagnosis as described below.

**Outbreak reports:** Any disease shall be reported by telephone when observed to occur clearly in excess of normal expectancy as determined by the healthcare provider or the Director of Health. The telephone report shall be followed by a written report submitted by mail or fax within three days to the Epidemiology Branch on Oahu, or to the District Health Offices on the neighbor islands.

**Note: Diseases shown in bold require URGENT action sometimes or always.**

<b>Disease</b>	<b>Reporting Category</b>
<sup>†</sup> Acquired Immunodeficiency Syndrome (CDC case definition)	<b>*Confidential</b>
<b>Amebiasis</b>	<b>Routine/Enteric</b>
<b>Anthrax</b>	<b>Urgent</b>
<b>Botulism, food borne</b>	<b>Urgent</b>
Botulism, wound or infant	Routine
Brucellosis	<b>Urgent</b>
<b>Campylobacteriosis</b>	<b>Routine/Enteric</b>
Chickenpox - varicella (report outbreaks only)	<b>Outbreak</b>
<sup>§</sup> Chlamydia ( <i>Chlamydia trachomatis</i> )	<b>*Confidential</b>
<b>Cholera</b>	<b>Urgent</b>
Congenital Rubella Syndrome	<b>Urgent</b>
<b>Cryptosporidiosis</b>	<b>Routine/Enteric</b>
<b>Dengue</b>	<b>Urgent</b>

<sup>†</sup> Reports shall be made to the AIDS Surveillance Program (CONFIDENTIAL), 3627 Kilauea Avenue, Rm. 306, Honolulu, HI 96816; F733-9010.

<sup>§</sup> Sexually transmitted diseases other than AIDS are to be reported to the STD Prevention Program, 3627 Kilauea Avenue, Room 304, Honolulu, HI 96816; F733-9281.

<i>Disease</i>	<i>Reporting Category</i>
<b>Diphtheria</b>	<b>Urgent</b>
Enterococcus, Vancomycin resistant	Routine
<b><i>Escherichia coli</i> O157:H7</b>	<b>Routine/Enteric</b>
Filariasis	Routine
<b>Fish poisoning</b> (ciguatera, scombroid, or hallucinogenic)	<b>Urgent</b>
<b>Food borne illness:</b> 2 or more ill persons having eaten: (a) a common food, or (b) at a place in common.	<b>Urgent</b>
<b>Giardiasis</b>	<b>Routine/Enteric</b>
<sup>†</sup> Gonococcal disease	<b>*Confidential</b>
<i>Haemophilus influenzae</i> serotype b ( <b>meningitis</b> , bacteremia, epiglottitis, pneumonia, or isolation from a normally sterile site).	<b>Routine</b>
<sup>§</sup> Hansen's disease	<b>*Confidential</b>
<b>Hantavirus Disease</b>	<b>Urgent</b>
<b>Hemorrhagic colitis due to <i>E. coli</i></b> , any strain or serotype	<b>Routine/Enteric</b>
<b>Hepatitis A</b> <i>*Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are HAV IgM+.</i>	<b>Urgent</b>
Hepatitis B (acute and chronic) <i>*Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are HBsAg+.</i>	Routine
Hepatitis C (acute only) <i>*Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are anti-HCV+.</i>	Routine
<b>Hepatitis E</b> <i>*Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are anti-HCV+.</i>	Routine
Hepatitis, viral (Non-A, Non-B, and Non-C, if test performed)	Routine
Hemolytic uremic syndrome (HUS)	<b>Routine/Enteric</b>
<b>HIV (Human Immunodeficiency Virus)</b> <sup>†</sup>	<b>*Confidential</b>
<b>Influenza</b> (report laboratory confirmed cases and outbreaks only)	<b>Urgent</b>
<b>Legionellosis</b>	<b>Urgent</b>
Leptospirosis	Routine
<b>Listeriosis</b>	<b>Routine/Enteric</b>
Malaria	Routine
<b>Measles</b> (rubeola)	<b>Urgent</b>
<b>Meningococcal Disease</b> (meningitis, meningococcemia, or isolation from a normally sterile site)	<b>Urgent</b>
Mumps	Routine
<sup>§</sup> Pelvic inflammatory disease (PID)	<b>*Confidential</b>
<b>Pertussis</b>	<b>Urgent</b>

<sup>†</sup> Sexually transmitted diseases other than AIDS are to be reported to the STD Prevention Program, 3627 Kilauea Avenue, Room 304, Honolulu, HI 96816; F 733-9281.

<sup>§</sup> Reports shall be made to the Hansen's Disease Community Program at F 735-2472.

<sup>†</sup> Reports shall be made to the AIDS Surveillance Program (CONFIDENTIAL), 3627 Kilauea Avenue, Rm. 306, Honolulu, HI 96816; F 733-9010 using UTC code.

<sup>§</sup> Sexually transmitted diseases other than AIDS are to be reported to the STD Prevention Program, 3627 Kilauea Avenue, Room 304, Honolulu, HI 96816; F 733-9281.

<i>Disease</i>	<i>Reporting Category</i>
<b>Plague</b>	<b>Urgent</b>
Pneumococcal disease (meningitis, bacteremia, or isolation from a normally sterile site)	Routine
<b>Poliomyelitis</b>	<b>Urgent</b>
<b>Psittacosis</b>	<b>Urgent</b>
<b>Q fever</b>	<b>Urgent</b>
<b>Rabies</b>	<b>Urgent</b>
<b>Rubella</b> (German measles)	<b>Urgent</b>
<b>Salmonellosis</b> (other than typhoid)	<b>Routine/Enteric</b>
<b>Shigellosis</b>	<b>Routine/Enteric</b>
<b>Smallpox</b>	<b>Urgent</b>
Streptococcal disease, Group A (beta hemolytic, invasive disease including Streptococcal Toxic Shock Syndrome or isolation from a normally sterile site, but not including pharyngitis)	Routine
<sup>†</sup> Syphilis	<b>*Confidential</b>
Tetanus	Routine
Toxoplasmosis	Routine
Trichinosis	Routine
<sup>¶</sup> Tuberculosis	<b>Urgent</b>
<b>Tularemia</b>	<b>Urgent</b>
<b>Typhoid Fever</b>	<b>Urgent</b>
Typhus (louse, flea, mite-borne)	Routine
<b>Vibriosis</b> (other than <i>cholera</i> )	<b>Routine/Enteric</b>
<b>Yellow fever</b>	<b>Urgent</b>
<b>Yersiniosis</b> (other than plague)	<b>Routine/Enteric</b>

<sup>†</sup> Sexually transmitted diseases other than AIDS are to be reported to the STD Prevention Program, 3627 Kilauea Avenue, Room 304, Honolulu, HI 96816; F 733-9281.

<sup>¶</sup> Tuberculosis shall be reported to the Tuberculosis Control Program at F 832-5731, x26, or by mail to TB Program, 1700 Lanakila Avenue, Honolulu HI 96817, Attn: Registry- CONFIDENTIAL or by FAX to 832-5846 Attn: Registry- CONFIDENTIAL.

Report all Diseases Except Tuberculosis, Hansen's Disease, Sexually Transmitted Diseases, AIDS,  
and Low CD4 to the Office in Your County

**Oahu**

P.O. Box 3378  
Honolulu, HI 96801  
Phone: (808) 586-4586  
FAX: (808) 586-4595

**Hawaii**

P.O. Box 916  
Hilo, HI 96720  
Phone: (808) 933-4539  
FAX: (808) 933-4669

**Maui**

54 High Street  
Wailuku, Hawaii 96793  
Phone: (808) 984-8213  
FAX: (808) 984-8222

**Kauai**

3040 Umi Street  
Lihue, Hawaii 96766  
Phone: (808) 241-3563  
FAX: (808) 241-3480

Exhibit B  
Hawaii Laboratory Reporting Requirements  
(January, 2001)

**Physicians, laboratory directors, and health care professionals to report.** Every physician or health care professional having a client affected by or suspected of being affected by a disease or condition declared to be communicable or dangerous to the public health by the director of health shall report the incidence or suspected incidence of such disease or condition to the department of health in writing or in the manner specified by the department of health. Every laboratory director having laboratory data regarding an individual affected by or suspected of being affected by a disease or condition declared to be communicable or dangerous to the public health shall report such diseases or conditions to the department of health in writing or in a manner specified by the health department. Every physician, laboratory director, or health care professional who refuses or neglects to give such notice, or make such report, may be fined in an amount not to exceed \$1,000 per violation, to be assessed by the director of health. The director of health is authorized to impose the penalty pursuant to this section.

**§325-2 Hawaii Revised Statutes.**

**Reports are to be made to the Epidemiology Branch on Oahu or the District Health Office on neighbor islands, except as noted below.**

### Reporting Categories

1. **URGENT** - Agents labeled URGENT shall be reported by telephone when a laboratory **request** is received.
2. **Immediate** - Positive test results for agents labeled "Immediate" shall be reported by telephone within 24 hours of confirmation, followed by a written notification by mail or fax.
3. **Routine** - Positive test results for agents and tests labeled "Routine" shall be reported in writing within 3 days of confirmation.
4. **Confidential** - Positive test results for agents and tests labeled "Confidential" shall be reported to the AIDS Surveillance Program by mail for confidential follow-up.

**Note: Agents or tests shown in bold require urgent or immediate action.**

Specimens to be sent to the Department as noted:  
 \*Sample of isolate    \*\*Blood smear    †Aliquot of positive serum  
 (\*) or (†) = Send sample or aliquot upon request only

Agent/Test	Category
<b><i>Bacillus anthracis</i></b>	<b>Urgent*</b>
<b><i>Bordetella pertussis</i></b>	<b>Immediate*</b>
<i>Brucella</i> spp.	<b>Urgent*</b>
<i>Campylobacter</i> spp.	Routine (*)
†CD4 T-lymphocyte count < 200/ℓ or CD4 T-lymphocyte percentage < 14%	Confidential
<b><i>Chlamydia psittaci</i></b>	<b>Immediate</b>
§ <i>Chlamydia trachomatis</i> , genital	Routine
<b><i>Clostridium botulinum</i> (Foodborne, wound, and infant)</b>	<b>Urgent*</b>

† Reports be made by mail to the AIDS Surveillance Program (CONFIDENTIAL), 3627 Kilauea Avenue, Rm. 306, Honolulu, HI 96816; F733-9010.

§ Sexually transmitted diseases other than AIDS shall be reported to the STD Prevention Program, 3627 Kilauea Avenue, Room 306, Honolulu, HI 96816; F733-9281.

Specimens to be sent to the Department as noted:  
 \*Sample of isolate \*\*Blood smear †Aliquot of positive serum  
 (\*) or (†) = Send sample or aliquot upon request only

Agent/Test	Category
<b><i>Clostridium tetani</i></b>	Routine
<b><i>Corynebacterium diphtheriae</i></b>	<b>Immediate*</b>
<i>Cryptosporidium</i> spp.	Routine
<b><i>Coxiella burnetii</i></b>	<b>Immediate</b>
<b>Dengue virus</b>	<b>Immediate</b>
<i>Entamoeba histolytica</i>	Routine
Enterococcus, Vancomycin resistant	Routine (*)
<i>Escherichia coli</i> - <b>shigatoxin producing, including</b> type O157	Routine*
<b><i>Francisella tularensis</i></b>	<b>Immediate</b>
<i>Giardia lamblia</i>	Routine
<b><i>Haemophilus influenzae</i></b> (from spinal fluid, blood, lung, or other normally sterile site) <b>Report serotype and antimicrobial resistance if available.</b>	<b>Immediate*</b>
<b>Hantavirus</b>	<b>Immediate (†)</b>
<b>Hepatitis A virus</b> (IgM positive) <b>*Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time.</b>	<b>Immediate</b>
Hepatitis B virus (surface antigen positive and/or anti-core IgM antibody positive) *Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are HbsAg+	Routine
Hepatitis C *Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are anti-HCV+.	Routine
<b>Hepatitis E *Also report liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time for all patients who are anti-HCE+.</b>	Routine
<b>HIV (Human Immunodeficiency Virus)†</b>	Confidential
Influenza virus	Routine
<b><i>Legionella pneumophila</i></b>	<b>Immediate (*)</b>
<i>Leptospira interrogans</i>	Routine <sup>§</sup>
<i>Listeria monocytogenes</i>	Routine*
Liver function tests (AST {SGOT}, ALT {SGPT}) conducted at the same time on a patient who is HBsAg+ or anti-HCV+.	Routine
<b><i>Lyssavirus</i> spp. (Rabies)</b>	<b>Urgent*</b>
<b>Measles/Rubeola (IgM)</b>	<b>Immediate†</b>
Mumps (IgM)	Routine (†)

† See §156-8.9 for special reporting requirements.

§ For *Leptospira interrogans* submit whole blood and paired serum samples.

Specimens to be sent to the Department as noted:  
 \*Sample of isolate \*\*Blood smear †Aliquot of positive serum  
 (\*) or (†) = Send sample or aliquot upon request only

Agent/Test	Category
‡ <i>Mycobacterium tuberculosis</i>	<b>Immediate</b>
§ <i>Mycobacterium leprae</i> (AFB) positive biopsies and smears	Routine
‡ <i>Neisseria gonorrhea</i> (including identification of resistant strains)	Routine*
<i>Neisseria meningitidis</i> (from spinal fluid, blood, lung, or other normally sterile site) <b>report antimicrobial susceptibility</b>	<b>Immediate*</b>
<i>Plasmodium</i> spp.	Routine**
<b><i>Poliovirus</i></b>	<b>Immediate*</b>
<i>Rickettsia typhi</i>	Routine†
<b>Rubella (IgM)</b>	<b>Immediate†</b>
<i>Salmonella</i> spp. (including <i>typhi</i> )	Routine*
<i>Shigella</i> spp.	Routine*
<i>Streptococcus pyogenes</i> , Group A (beta hemolytic, invasive disease including Streptococcal Toxic Shock Syndrome or other normally sterile site, but not including pharyngitis)	Routine (*)
<i>Streptococcus pneumoniae</i> - also report drug resistance when isolate obtained from a normally sterile site, <b>report antimicrobial susceptibility.</b>	Routine
<b><i>Toxoplasma gondii</i></b>	Routine
<sup>5</sup> <i>Treponema pallidum</i>	Routine†
<i>Trichinella spiralis</i>	Routine
<i>Wuchereria bancrofti</i>	Routine
Varicella (IgM)	Routine (†)
<b><i>Variola virus</i></b>	<b>Immediate</b>
<b><i>Vibrio cholerae</i></b>	<b>Urgent*</b>
<i>Vibrio</i> spp. (other than <i>cholerae</i> )	Routine*
<b>Yellow fever virus</b>	<b>Urgent</b>
<b><i>Yersinia pestis</i></b>	<b>Urgent*</b>
<i>Yersinia</i> spp. (other than <i>pestis</i> )	Routine*

† Tuberculosis shall be reported to the Tuberculosis Control Program at F832-5731, x26, or by mail to TB Program, 1700 Lanakila Avenue, Honolulu HI 96817, Attn: Registry- CONFIDENTIAL or by FAX to 832-5846 Attn: Registry- CONFIDENTIAL.

§ Reports shall be made to the Hansen's Disease Community Program at F735-2472.

‡ Sexually transmitted diseases other than AIDS are to be reported to the STD Prevention Program, 3627 Kilauea Avenue, Room 304, Honolulu, HI 96816; F733-9281.

**DRAFT 4/12 - Additions are highlighted**

~~Deletions are stricken~~

Report all Diseases Except Tuberculosis, Hansen's Disease, Sexually Transmitted Diseases, AIDS,  
and Low CD4 to the Office in Your County

**Oahu**

P.O. Box 3378  
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3040 Umi Street  
Lihue, Hawaii 96766  
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## Hawaii Isolation and Control Requirements

January 1, 2001

*Any person informed by the department, a private physician, or hospital that he or she has or is suspected of having a communicable disease for which isolation is required, shall remain isolated in the manner prescribed by the department of health. Isolation shall include exclusion from school and workplace, and restriction from food handling and direct care occupations. It is the responsibility of the principal or director in charge of a school to prohibit any student diagnosed or suspected of having a communicable disease for which isolation is required from attending school until the expiration of the prescribed period of isolation. Parents, guardians, custodians or any other person in loco parentis shall not permit any child diagnosed or suspected of having a communicable disease for which isolation is required to attend school or to be present at any public gatherings until the expiration of the prescribed period of isolation. No person diagnosed or suspected of having a communicable disease for which isolation is required shall engage in any employment in which transmission of disease is likely to occur until expiration of the prescribed period of isolation. Every health care provider shall report immediately to the department any violation of such isolation directive.*

The diseases described below are declared by the Director of Health to be a threat to the public health. Restrictions shall be imposed on cases, suspected cases, and contacts of cases to the degree and for the duration indicated below.

*Note: See page 4 for definitions of key terms*

Disease	For Cases and Suspected Cases	For Contacts
AIDS (Acquired Immunodeficiency Syndrome, CDC case definition)	None	None
Amebiasis	Restrict from food handling and direct care occupations until chemotherapy is completed.	None
Anthrax	None	None
Botulism, foodborne	None	None
Botulism, infant	None	None
Brucellosis	None	None
Campylobacteriosis	Restrict from food handling and direct care occupations until asymptomatic.	None
Chickenpox (varicella)	Non-hospitalized persons: restrict from school, work, or other public places including hotel lobbies, restaurants and airplanes for 5 days after skin lesions appear. Hospitalized persons: airborne and contact precautions until at least 5 days after the eruption appears or until vesicles become dry.	None
Chlamydia ( <i>Chlamydia trachomatis</i> )	None	None
Cholera	Restrict from foodhandling until asymptomatic.	None
Congenital Rubella Syndrome	None	None
Cryptosporidiosis	Restrict from food handling and direct care occupations until asymptomatic.	None
Dengue	None	None
Diphtheria	Droplet precautions for pharyngeal diphtheria, contact precautions for cutaneous diphtheria; Maintain isolation until two cultures from both throat and nose (skin lesions in cutaneous diphtheria) taken \$ 24 hours apart, and not less than 24 hours after cessation of antimicrobial therapy, fail to show diphtheria bacilli.	Exclude from occupations involving food handling or close association with children until proven culture negative.
Enterococcus, vancomycin resistant	None	None
<i>Escherichia coli</i> O157:H7 or other <i>E. coli</i> shiga toxin produced hemorrhagic colitis	Restrict from food handling, direct care occupations and school until asymptomatic and stool culture negative.	None
Filariasis	None	None

Disease	For Cases and Suspected Cases	For Contacts
Fish poisoning (ciguatera scombroid or hallucinogenic)	None	None
Foodborne illness (2 or more ill persons eating either a common food or at a place in common)	Restriction from food handling and direct care occupations may be required; refer to specific agent.	Restriction from food handling and direct care occupations may be required; Refer to specific agent.
Giardiasis	None	None
Gonococcal disease	None	None
<i>Haemophilus influenzae</i> (meningitis, bacteremia, epiglottitis, pneumonia, or isolation from a normally sterile site) <b>Report serotype if available.</b>	Droplet precautions until 24 hours after the start of effective antibiotic therapy.	None
Hansen's disease	None	None
Hantavirus Disease	None	None
Hepatitis A	Restrict from food handling and direct care occupations for first two weeks of illness, but no more than 1 week after jaundice. For preschool children restrict from daycare for 10 days after diagnosis.	Restrict from food handling until laboratory tests confirm contact is free of HAV infection.
Hepatitis B (acute)	None	None
Hepatitis C	None	None
<del>Hepatitis Non-A Non-b</del>	<del>None</del>	<del>None</del>
Hemolytic uremic syndrome	Restriction may be required; refer to specific agent.	None
Influenza, outbreak	Hospitalized persons: droplet precautions for 5 days.	None
Legionellosis	None	None
Leptospirosis	None	None
Listeriosis	None	None
Malaria	None	None
Measles (rubeola)	Non-hospitalized persons: restrict from school, work, or other public places including hotel lobbies, restaurants and airplanes for 4 full days after appearance of the rash. Hospitalized patients: airborne precautions until 4 full days after appearance of the rash.	Exclude susceptible contacts from school, workplace and other group settings from the 7th through the 18th day after exposure.
Meningococcal disease (meningitis, meningococemia, or isolation from a normally sterile from a normally sterile site.	Droplet precautions until 24 hours after the start of effective antibiotic therapy.	None
Mumps	Non-hospitalized persons: restrict from school, work, or other public places including hotel lobbies, restaurants and airplanes for 9 days after onset of swelling or parotitis. Hospitalized patients: droplet precautions until 9 days from onset of swelling or parotitis.	Exclude susceptible contacts from school, workplace and other group settings from the 12th through the 25th day after exposure.
Pelvic inflammatory disease (PID)	None	None
Pertussis	Non-hospitalized persons: restrict from school, work, or other public places including hotel lobbies, restaurants and airplanes until 5 days of a minimum 14-day course of antibiotics has been completed or until 3 weeks after the onset of paroxysmal cough. Hospitalized persons: droplet precautions until 5 days of a minimum 14-day course of antibiotics has been completed or until 3 weeks after the onset of paroxysmal cough.	Exclude household and other close contacts from school, workplace and other group settings until completion of 5 days of a minimum 14-day course of antibiotics or for 14 days from last exposure.
Plague	Droplet precautions for pneumonic plague until completion of 3 full days of appropriate antibiotic therapy with a favorable clinical response.	None

Disease	For Cases and Suspected Cases	For Contacts
Pneumococcal pneumonia	None	None
Poliomyelitis	None	None
Psittacosis	None	None
Rabies	Contact precautions for respiratory secretions for duration of illness.	None
Rubella	Non-hospitalized persons: restrict from school, work, or other public places including hotel lobbies, restaurants and airplanes for 7 days after appearance of the rash. Hospitalized patients: droplet precautions until 7 days after appearance of rash.	Exclude susceptibles from school, workplace and other group settings from the 14th through the 23rd day after exposure.
Salmonellosis (other than typhoid)	Restrict from food handling and direct care occupations until 2 consecutive stool cultures, collected \$ 24 hours apart, and not less than 48 hours after cessation of antimicrobial therapy, are negative for <i>Salmonella</i> .	Restrict from foodhandling and direct care occupations until stool is known to be culture negative.
Shigellosis	Restrict from food handling and direct care occupations until 2 consecutive stool samples or rectal swabs collected \$ 24 hours apart, and not less than 48 hours after cessation of antimicrobial therapy are negative for <i>Shigella</i> .	Restrict from foodhandling and direct care occupations until stool is known to be culture negative.
Streptococcal disease, Group A (beta hemolytic, invasive disease not including pharyngitis)	Exclude from foodhandling until 48 hours after the start of effective antibiotic therapy.	None
Syphilis	None	None
Tetanus	None	None
Toxoplasmosis	None	None
Trichinosis	None	None
Tuberculosis	Restrict from school and workplace until sputum smear negative. Hospitalized patients: Airborne precautions. Discontinue precautions <i>only</i> when TB patient is on effective therapy, is improving clinically, and has three consecutive negative sputum smears collected on different days.	None
Typhoid Fever	Restrict from food handling and direct care occupations until 3 consecutive negative stool cultures are obtained from stools collected \$ 24 hours apart, and not less than 48 hours after cessation of antimicrobial therapy, and not earlier than 1 month after onset.	Restrict from food handling and direct care occupations until 2 consecutive negative stool cultures are obtained from stools collected \$ 24 hours apart.
Typhus (louse, flea, mite-borne)	None	None
Vibriosis (other than <i>cholerae</i> )	Restrict from food handling until asymptomatic.	None
Yellow fever	None	None
Yersiniosis (other than plague)	Restrict from food handling and direct care occupations until asymptomatic.	None

## DEFINITIONS:

**Contact** - a person who has been in such an association with an infected person or animal or a contaminated environment as to have had an opportunity to acquire the infection.

**Airborne precautions** - measures intended to prevent transmission of infection by airborne droplet particles containing microorganisms that remain suspended in the air and that can be widely dispersed by air currents. In addition to standard precautions, a private, negative air pressure isolation room is indicated; however, patients infected with the same organism may share the same isolation room. Respiratory protection should be worn by all susceptible persons entering the isolation room. Patient transport should be minimized.

**Contact precautions** - measures intended to prevent infection by microorganisms transmitted via direct contact with a patient or by indirect contact with environmental surfaces or patient-care items in the patient's environment. In addition to standard precautions, a private room is indicated, but patients infected with the same organism may share a room. Masks are indicated for those in close contact with the patient; gowns should be worn if soiling is likely; gloves are indicated if touching potentially infectious surfaces.

**Direct care occupations** - any occupational activity that has the potential to result in the transmission of infectious microorganisms from a care-giver to persons receiving care. Direct care occupations include persons engaged in providing care to children, patients, the elderly, or infirm.

**Droplet precautions** - measures intended to prevent infection by microorganisms transmitted via relatively large droplets that can be generated by a patient while coughing, sneezing, and talking. In addition to standard precautions, a private room is indicated, but patients infected with the same organism may share a room. Masks are indicated for those in contact with the patient. Gowns and gloves are not required.

**Foodhandling** - any contact with food, beverages, or materials and/or items used in their preparation that has the potential to result in the transmission of infectious microorganisms via ingestion of the food and/or beverage. Examples of foodhandling include (but are not limited to) transporting food or food containers, preparation or service of food, and contact with utensils or food associated equipment.

**Standard precautions** - measures intended to prevent transmission of infectious microorganisms that should be employed with all patients receiving care, regardless of their diagnosis or presumed infection status. In general terms these measures include handwashing with appropriate soap after each contact with potentially infectious materials, between patients and when indicated, between different sites on the same patient; wearing gloves when touching blood, body fluids, secretions, excretions, and contaminated items; wearing masks and eye protection for patient care activities likely to generate splashes; wearing gowns for patient care activities that are likely to generate splashes or sprays in order to protect skin, clothing and mucous membranes; appropriate handling and disinfection of patient care equipment; and routine implementation of environmental cleaning and disinfection procedures.